EMWS
CCW Service Plan Checklist
User Desk Guide

Introduction and Support

This desk user guide is intended to help a case manager with the technical details of entering a new CCW Service Plan in the EMWS. It is intended that this desk reference guide be used in tandem with the CCW Case Management Manual to fully help a case manager through the service planning process. This desk guide references relevant Case Manager Manual pages for each of the topics addressed to help with the ease of that process.

If at any time you have technical questions or need technical support on a case please reach out the CCW help desk by emailing ccw.emws.helpdesk@wyo.gov . Please remember not to put HIPAA data in unsecure emails.

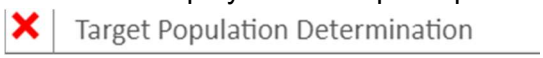
Please contact your Benefits and Eligibility Specialist (BES) for any program and policy related questions and/or support.

New Service Plan

The new CCW Service Plan is in the format of a checklist to guide the case manager through the steps of the new plan. Each step is either manually completed by the case manager or system completed based on data entered into the system. The guide steps through the checklist calling out each step and how it should be completed.

As you go through the service plan, status indicators will display to help you know which steps are completed, in progress, need to be completed, or don't meet criteria.

- If the step is completed there will be a green check mark ✔ next to the task on the checklist.
- If the step is in progress there will be a yellow circle
- If the task does not meet criteria a red X will display. X
    - Tasks that could have a red X are items such as Initial Medicaid Eligibility Confirmation, Level of Care Determination, Target Population Determination, and will display when the participant does not meet the criteria.



Plan Enrollment Dates: 1/1/2021 - 12/31/2021 (Active)

Effective Date: 1/1/2021 (Renewal)

Status: Awaiting Level of Care Determination

Plan Mod Details

Plan Enrollment Start Date: 1/1/2021 Plan Enrollment End Date: 12/31/2021

The start date can no longer be changed for this plan, or you do not have permission to change the start date.

Service Plan Checklist

Assessment and Service Plan Preparations

	Initial Medicaid Eligibility Confirmation		
	Level of Care Determination		
	Target Population Determination		
☐	Call to Schedule	Not Set	Set
☐	Coordinate with Natural Supports (if applicable)		
☐	Print Participant Handbook & Other Program Documents		

Assessment

	Complete Assessments	Add Assessment
	Participant Profile (required)	
	Complete Participant Profile Assessment	
☐	Discuss Participant Goals	
☐	Goals	Add Goal
☐	Print Assessment Summary	

Service Plan Development

☐	Review Assessment Summary with Participant	
☐	Discuss Needs to be Addressed	
☐	Discuss Potential Risks	
	Add Services, Supports, and Risk Mitigation Plans	
	Risks & Needs	
	Addressed? Risk/Need	
	Print Participant Service Plan Summary	
	Await Waiver Service Provider Confirmation	

Finalize Service Plan

	Review Service Plan Summary with Participant	
	No services added.	
	Upload Participant Agreement	
	Finalize Service Plan	

Send Services to MMIS

✔	Medicaid Eligibility Activation	
	MMIS Approval	
	Address MMIS Errors	
	Acknowledge MMIS Approval	
	Plan Complete	

Links

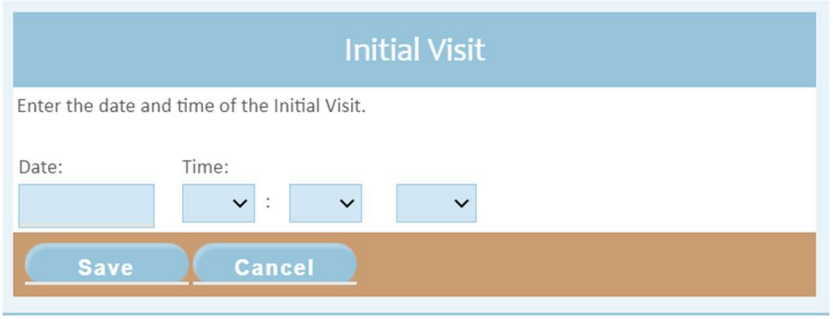
Prepare for the Initial Visit

- ***Initial Medicaid Eligibility Confirmation*** - System complete based on data entered in the eligibility process.

- ***Level of Care Determination*** -System complete based on LT 101 assessment completed the case manager will need to select the LT 101 from the list of LT's

- ***Target Population Determination*** -System complete based on eligibility data. The case manager can click on "View Determination" to view the criteria and what has been met or not met.

- ***Call to Schedule*** - Case manager manual completion and initial visit date entry. Click on "Set" to set the date and time of the meeting and then click on the box to mark the task as completed.



- ***Coordinate with Natural Supports (if applicable)*** - Case manager manual completion.

- ***Print Participant Handbook & Other Program Documents*** - Case Manager manual completion

Assess Participant Needs

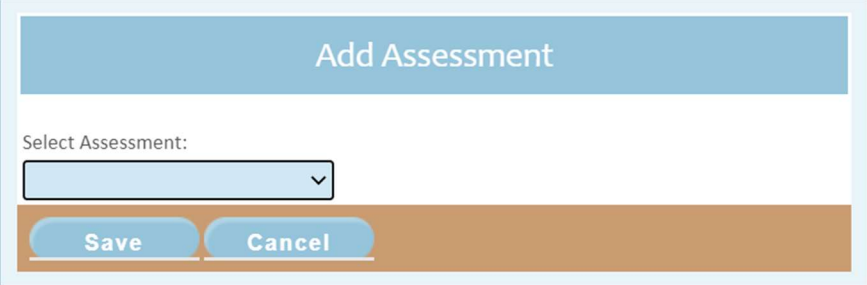
Case Manager Manual pages 22-25

- ***Complete Assessments*** - Case Manager completes up to 6 assessments, at a minimum the participant profile assessment must be complete. Other assessments may be required to be completed based on the responses to the participant profile and/or the services that are added to the plan. The six assessments include:

    - Participant Profile
    - Supported Decision-Making
    - Participant Direction Assessment
    - Housing and Environment Assessment
    - Community Relationships Assessment
    - Caregiver Assessment

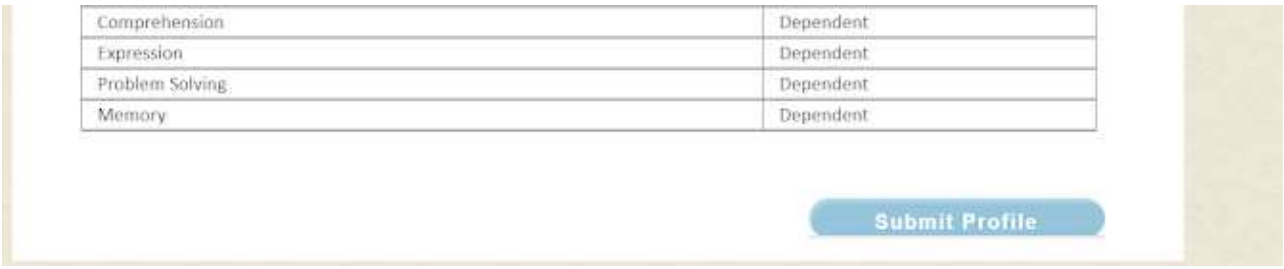
    Complete the assessment by clicking on it, answering the questions, and then submitting. When all assessments have been completed the system will mark the task complete.

Assessments can be manually added by clicking on the Add Assessment button and selecting the assessment needed to be add in the drop down.



- ***Complete Participant Profile Assessment*** - Adding of key contacts based on the responses to the assessment questionnaires, as well as, uploading of key documents. The Case Manager will complete the requested information on the screen and then "submit the profile" which will mark the task complete.

Hiccup		
Do you have a Guardian?	Yes	test doc.p... Upload File Jill Haddock Add Contact
Do you have Provider Orders for Life Sustaining Treatment (POLST) or some other form of advance directives for your medical care?	Yes	test doc.p... Upload File
Do you have a Power of Attorney (POA) for healthcare decisions?	Yes	test doc.p... Upload File Test Attorney Add Contact
Do you have a Power of Attorney (POA) for financial decisions?	Yes	test2 doc.... Upload File Test Attorney Add Contact
Are there certain situations where you need help making decisions?	Yes	
If Yes, do you have a decision-making agreement in place?	No	



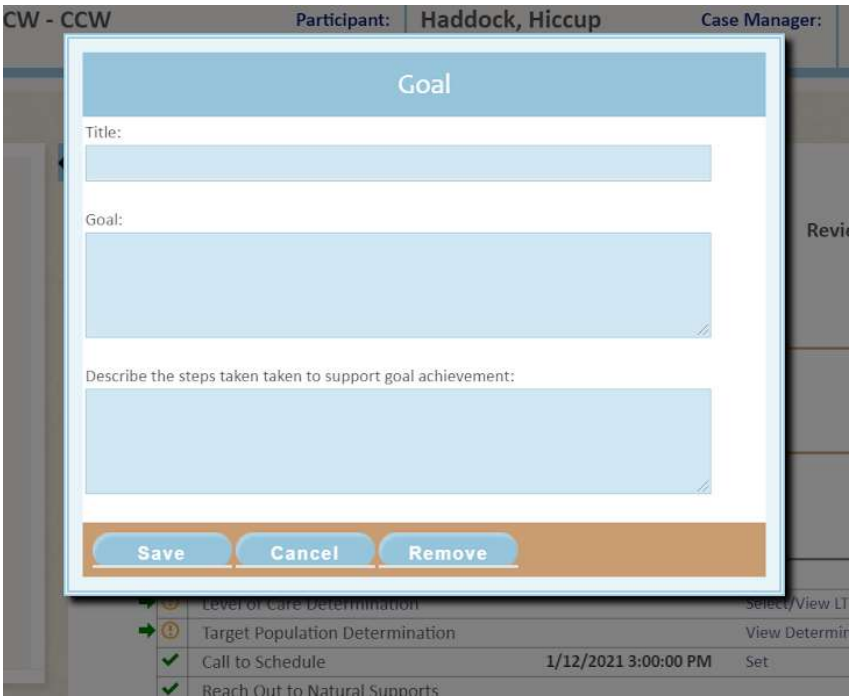
Comprehension	Dependent
Expression	Dependent
Problem Solving	Dependent
Memory	Dependent

Submit Profile

Case Manager Manual page 25

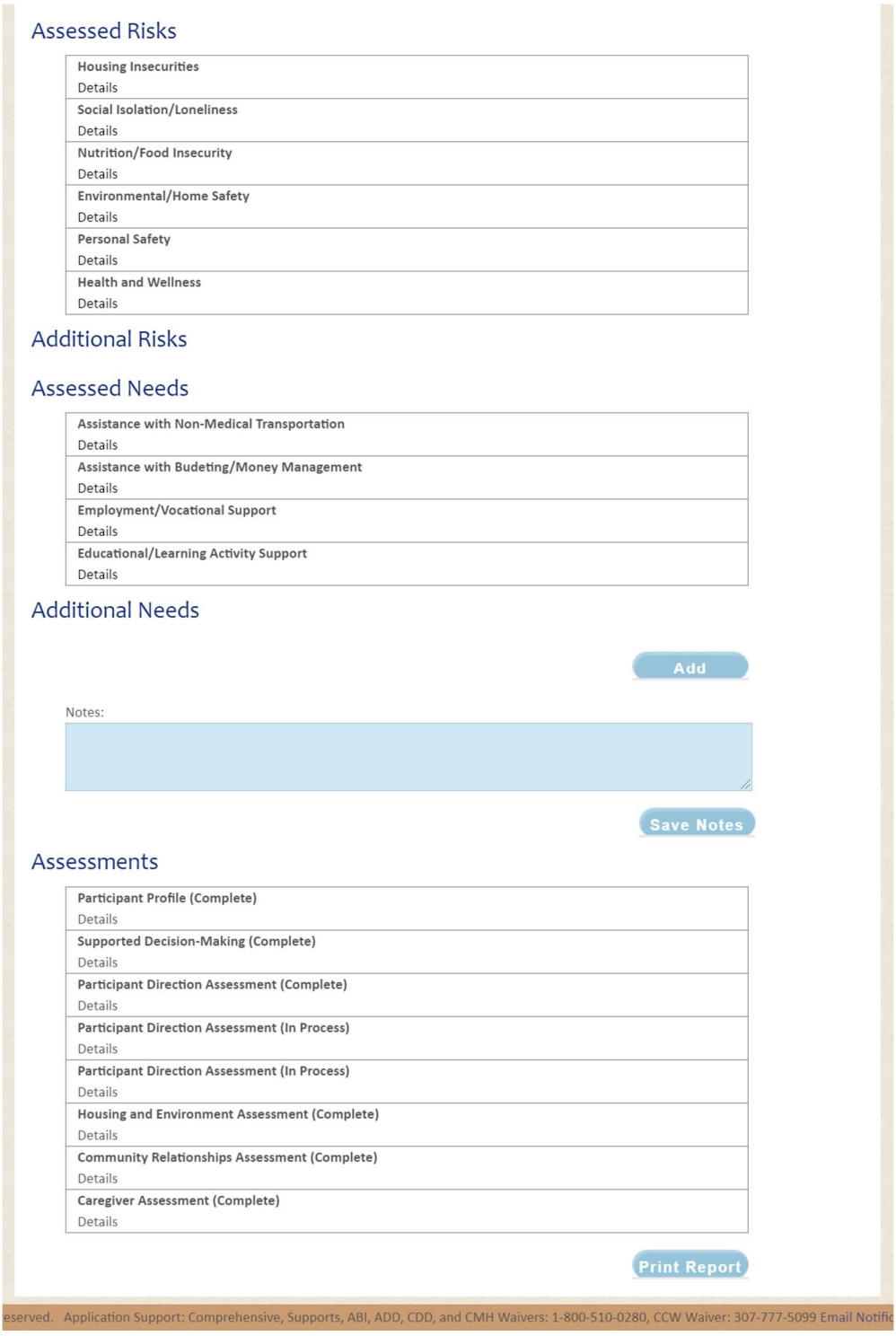
- ***Discuss Participant Goal*** - Case manager manual completion.

- ***Goals*** - Case Manager creates goals for the participant for the Service Plan, when all goals have been added the case manager marks the step complete (click in the box)



Case Manager Manual page 26

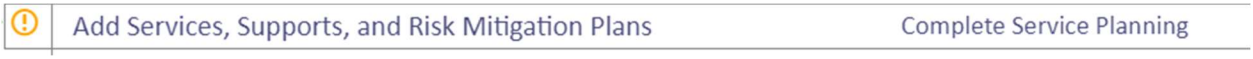
- ***Print Assessment Summary -*** Generation and review of the assessment summary. Including the adding of additional risks and needs not identified through the assessments. Once completed the case manager completes the step. The view each section is expandable. To expand a section click on the section and it will expand with details of the questions that identified that risk or need. To print the Assessment Summary click on the blue print button at the bottom of the page. It will generate in a PDF format. Note: The needs and risks identified and added will show on the service area.

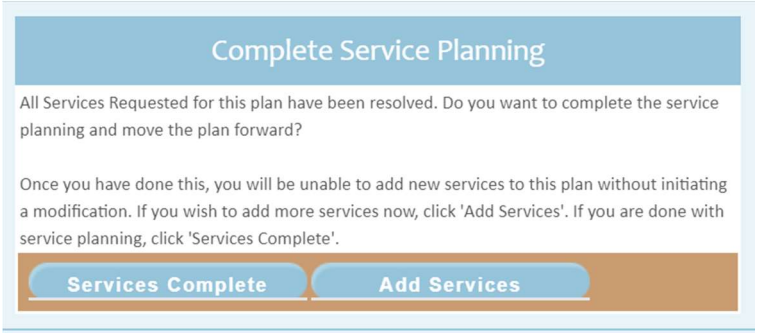


Service Plan Development

Case Manager Manual pages 26-35

- ***Review Assessment Plan Summary with Participant*** - Case Manager manual completion
- ***Discuss Needs to be Addressed*** - Case Manager manual completion
- ***Discuss Potential Risks*** - Case Manager manual completion
- ***Add Services, Supports or Risk Mitigation*** - Case Manager adds waivers services, non-waivers services and/or risk mitigation plans based on the needs of the client. To go to the service page to add items click on the Add Services, Supports, and Risk Mitigation Plans. Once all service and risk mitigation plans have been completed, all service are accepted by the providers and all needs and risks have been met the option of Complete Service Planning will be available for the case manager to select and complete this step.





Waiver Services - Waivers Services are added by clicking on the add waiver service button on the services page.

Once a service request is selected the case manager will enter the service provider, frequency and details of how the service is to be provided and what need and risk the service is meeting. There are a list of questions that must be answered by the case manager for various services, as well as the possibility of needing to enter a backup plan, upload documents and rights forms. All items that need to be completed for the service will show up on the service request page and will be completed by the case manager on that page.

Service Details

Start Date:
2/1/2021

End Date:
1/31/2022

Service:
S5170 - Home Delivered Meals

Provider:
MEALS ON WHEELS OF CHEYENNE

Hot or frozen meals delivered to the home of the participant when the participant is unable to prepare a meal for him or herself and the individual regularly responsible for these activities is temporarily absent or unable to conduct these activities.

This service is provided in units of **1 Meal**

I am requesting this service be provided 2 time(s) every Day

Notes -
Please include any preferences for day of week the service is provided, and preferred time of day on those days for the service to be provided.

Backup Plan -
Describe the backup plan for a temporary disruption of service delivery (e.g. provider is late or unavailable or due to a community-wide disaster such as a blizzard). The backup plan must be tailored to the participantâ€™s needs, preferences, and available resources. The backup plan may include, but is not limited to:
Seeking temporary assistance from a member of the participantâ€™s natural support network,
Contacting the provider agency for assignment of an on-call or alternate caregiver,
Contacting the case manager to coordinate delivery of an alternate service or support, and/or
Employing and an on-call or alternate caregiver under the participant-directed service delivery option.

If you are unable to deliver the meals please....detail here...

Questions:

Is the participant able to prepare meals for him or herself?	○Yes ◉No
Are there other members of the household available and able to prepare meals for the participant?	○Yes ◉No

* indicates that one response requires the rights form to be filled out

Addressed Risks & Needs

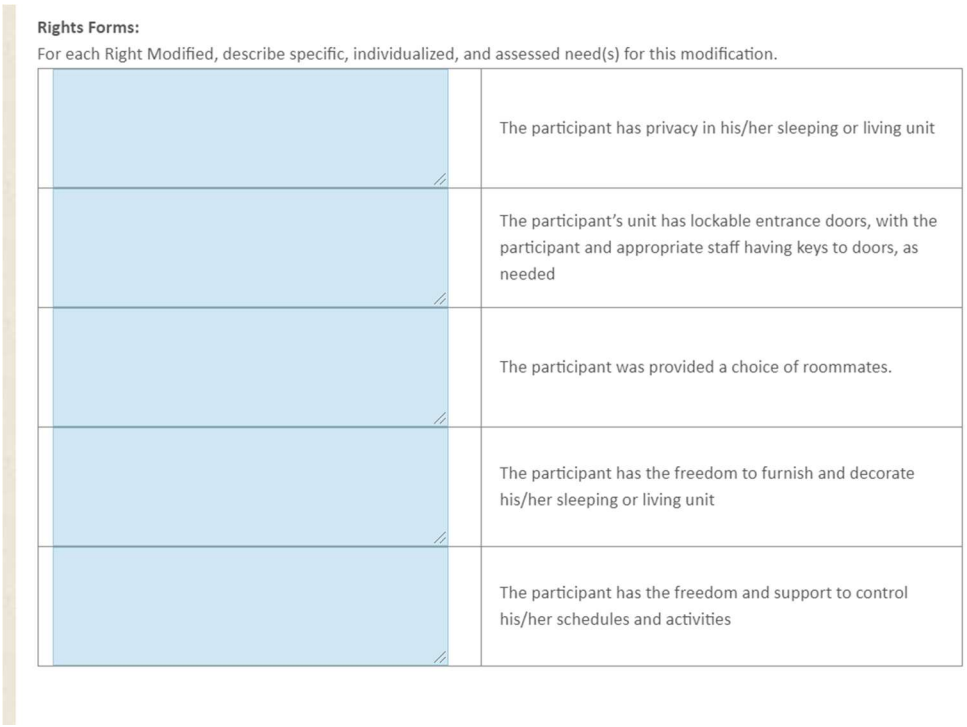
The following needs and/or risks were identified for this Service Plan. Click the checkbox to indicate that this need/risk will be addressed by this service.

Addressed?	Risk/Need
☐	Risk - Housing Insecurities
☐	Risk - Environmental/Home Safety
☐	Risk - Social Isolation/Loneliness
☑	Risk - Nutrition/Food Insecurity
☐	Risk - Personal Safety
☑	Risk - Health and Wellness
☐	Need - Assistance with Non-Medical Transportation
☐	Need - Assistance with Budeting/Money Management
☐	Need - Employment/Vocational Support
☐	Need - Educational/Learning Activity Support

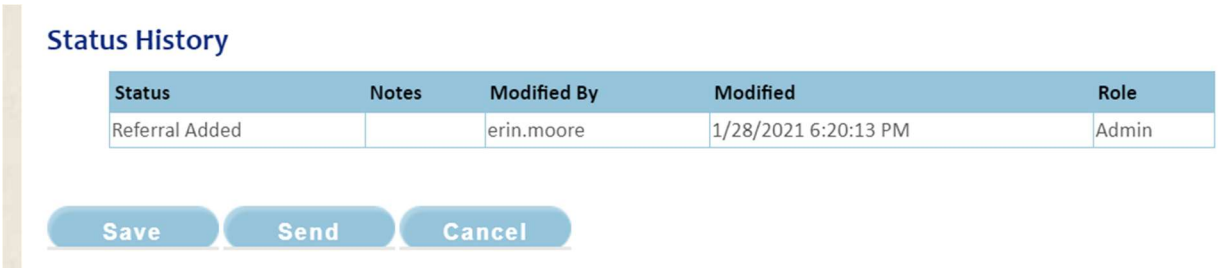
Status History

Status	Notes	Modified By	Modified	Role
Referral Added	Please deliver the meal to the participants home at 12345 Edge Street 2 times daily. The client would prefer the times of 8 am and 5 pm.	erin.moore	1/12/2021 9:16:30 PM	Admin
Referral Requested	Please deliver the meal to the participants home at 12345 Edge Street 2 times daily. The client would prefer the times of 8 am and 5 pm.	erin.moore	1/12/2021 9:17:15 PM	Admin
Referral Accepted	We can provide the service as expected.	erin.moore	1/12/2021 9:20:38 PM	Admin

Cancel



Once the case manager has entered all the required information for the service they will hit send to send it to the provider.



The provider selected in the service request, will receive the service in the provider portal once a case manager sends the service request. The provider will then need to accept the service request, deny the service request, or request a modification. This back and forth with the case manager and the provider can happen as many times as needed until the provider accepts or denies the service request.

- If the service request is **accepted** the system will recognize the service as complete, will add it to the plan and will send the service over to MMIS once the entire CCW service planning process is complete.

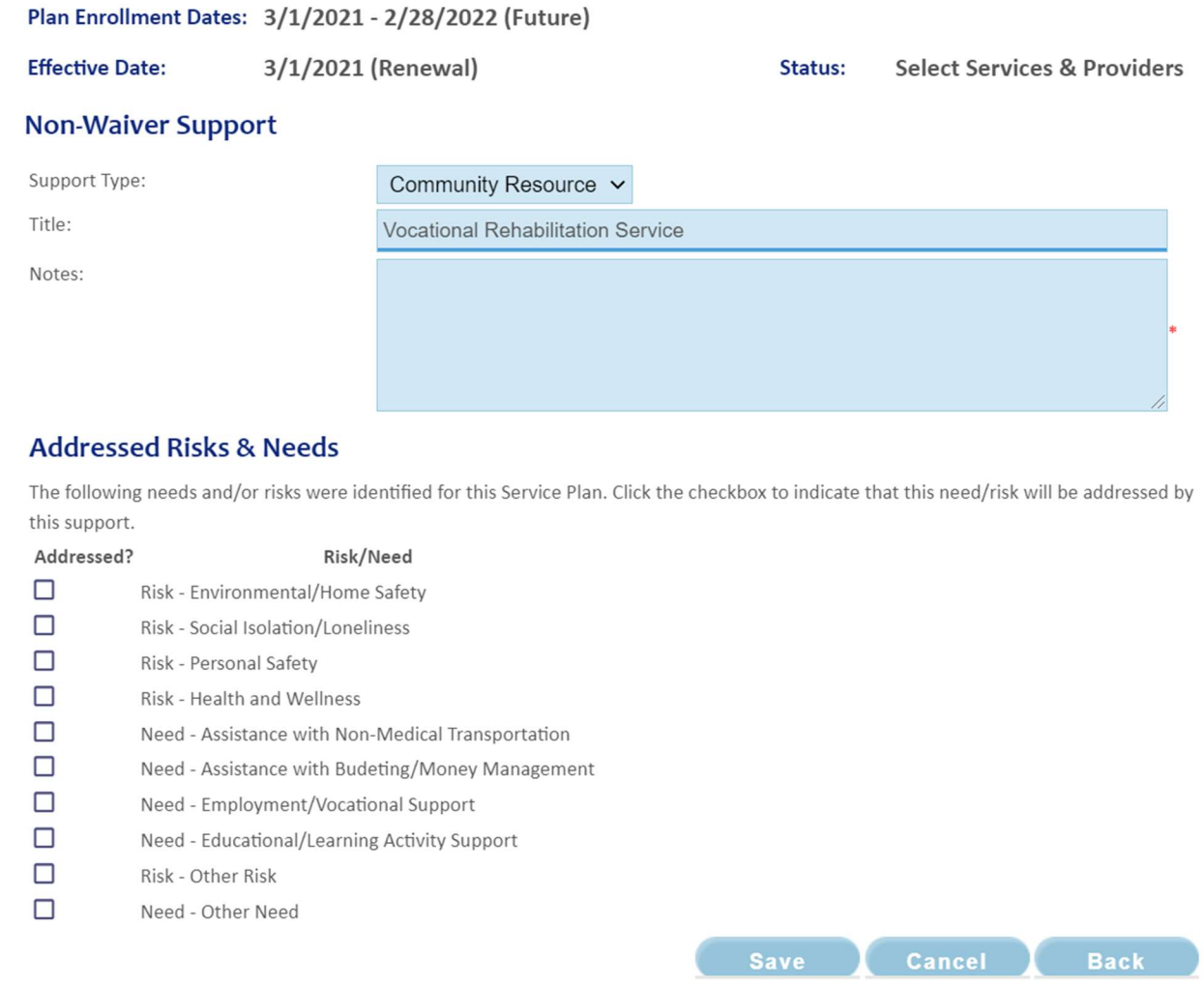
- If the service request is **denied** by the provider that request is considered complete in process and will not be put on the file for MMIS. The case manager

will need to create another service request with a different provider for the service to be added to the plan and sent over to MMIS.

- This process ***does not*** apply to the Case Manager Services. Those services once entered and sent will move directly to the accepted status a case manager ***does not*** need to log into the provider portal to accept these service requests.

Non-Waiver Services - Non-Waiver Services are added by clicking on the add Non-Waiver Service button on the services page.

Once a service request is selected the case manager will enter the support type, title and notes/details of the service being provided as well as the risks and needs addressed through the service. Then click on the save button which will save the service to the plan.



Risk Mitigation - Risk mitigation plans are added when a risk or need will not be met by a waiver service or non-waiver service on the plan. A risk mitigation plan is added by clicking on the Add Risk Mitigation button on the services page.

Once a risk mitigation plan is selected the case manager will enter the contributing factors, title, the risk mitigation plan details, as well as, the risks and needs addressed through the risk mitigation plan. Then click on the save button which will save the risk mitigation plan to the service plan.

- ***Await Provider Service Confirmation*** - System completed once all services have been completed and accepted by the providers.

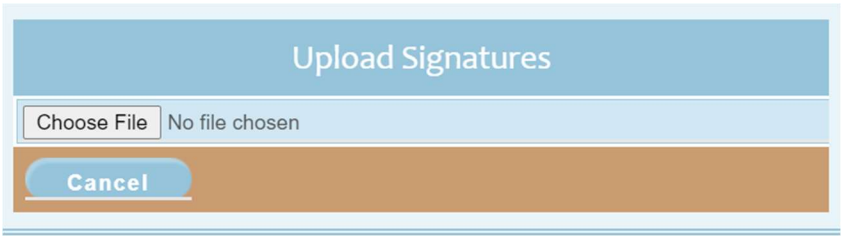
- **Participant Service Plan Summary** - Once all the services have been created and finalized with the providers the Participant Service Plan Summary can be generated by clicking on the Participant Service Plan Summary. This will download in a PDF document that the participant and others involved can sign. Once generated this step will be marked complete by the system.

Finalize Service Plan

Case Manager Manual pages 35-36

Review Participant Service Summary - Case Manager manual completion once the Service Plan has been reviewed by the participant.

Upload Signatures - Case manager uploads the service plan signed document. Once uploaded the task will complete.



Finalize Service Plan - Case Manager manual completion.

Send Services to MMIS

- ***Medicaid Eligibility Activation*** - Complete by Medicaid Eligibility staff through a task.
- ***MMIS Approval*** - System completes once PA have been issued from MMIS imported into the system
- ***Address MMIS Errors*** - Only needed and used if there are MMIS errors.
- ***Acknowledge MMIS Approval*** - Case Manager manual completion completed when the PA's have been received from MMIS.
- ***Plan Complete*** - System checked after acknowledgement.